

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			10 2-5-01
FORMALITY REVIEW	MTB	954	2/27/01
RESPONSE FORMALITY REVIEW	Zm	927	06/21/01

INDEX OF CLAIMS

.....	Rejected	N	..... Non-elected
.....	Allowed	I	..... Interference
..... (Through numeral).....	Canceled	A	..... Appeal
.....	Restricted	O	..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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